

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CS (SEMIAMBULATORY)

**Facility Information**

**Facility Name:** LAKE POINTE MANOR (310266)

**Address:** 8781 TRAVIS CT, FRANKLIN, WI 53132

**License Status:** REGULAR

**Licensed/Certified/Registered** 06/12/1996

**Regional Office:** SOUTHEASTERN REGION (MILWAUKEE), (414) 227-2005

**Survey History**

**Survey ID:** 0093100      **End Date:** 08/04/2004      **Type:** STANDARD      **Purpose:** SURVEY/COMPLAINT

**Results:** STATEMENT OF DEFICIENCY ISSUED

**Statement of Deficiency:** #10008737    Served 08/13/2004

Deficiencies Cited

83.17(3)(a)1

83.17(3)(a)2

Subject Area

HOLDING RESIDENT FUNDS-MORE THAN \$200

ACCURATE ACCOUNTING OF RESIDENT FUNDS

Compliance  
Verified

Corrected

*Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.*

**Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006  
Community Based Residential Facility  
CLASS CS (SEMIAMBULATORY)

**Complaint History**

**Date Complaint Received: 05/20/2004**

**Date Investigation Completed: 07/28/2004**

Subject Area(s)

Result

SOD #

ABUSE

NOT SUBSTANTIATED

OTHER

SUBSTANTIATED

10008737

**Date Complaint Received: 11/10/2003**

**Date Investigation Completed: 06/30/2004**

Subject Area(s)

Result

SOD #

PROGRAM SERVICES

NOT SUBSTANTIATED

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